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ECDC MANAGEMENT BOARD
4th Meeting, Budapest, 27-28 October 2005

Document: Project for Influenza Pandemic Preparedness (See with paper MB4/12/21 on Avian Influenza for more general areas e.g. on risk monitoring, communication)	
Date: 18 October 2005	Reference: MB4/12/20
To: Members of the Management Board	From: ECDC
Action: For information and advice. Management Board members are asked to note, inform their colleagues in their countries of relevant ECDC action and to comment on the document. Time for discussion at the meeting will be short members so Board Members are invited to also send comments to influenza@ecdc.eu.int Could members comment on the level of preparatory work in their own country in terms of: a) intensity b) depth (is it taking place just at national or also local levels) c) multi-sectoral nature (is preparation limited to the health sector or are there also plans for action across other key sectors)	
Summary: ECDC is making preparedness for pandemic influenza among its highest priorities. It is doing so as a collaborative effort with the European Commission, DG Sanco and WHO Europe. ECDC has developed a matrix approach to implement the work. Specific work areas are Risk monitoring and assessing the threat of avian and pandemic influenza Strengthening European, ECDC and country preparedness including developing relevant tools and guidelines and helping develop countermeasures and interventions. Developing surveillance of seasonal, epizootic and pandemic influenza. Ensuring effective communication among Member states, European agencies and the European Commission, international partners, and the public Monitoring scientific developments, providing scientific opinion and promoting scientific issues related to influenza control. Undertaking relevant advocacy Supporting MS in investigation and response at early phases of the Pandemic and especially for Avian Influenza. Establishing crisis co-ordination internally and developing key partnerships.	

Essential Information

1. It is impossible to assess precisely the imminent risk of an influenza pandemic. The situation in East and South East Asia with extensive epidemics in domestic birds of A/H5N1 and occasional transmissions to humans usually resulting in severe disease is worrisome and has resulted in a global level of Pandemic Alert Phase 3. The situation in birds and humans may remain unchanging or perhaps improve. Alternatively, there might be an A/H5N1 pandemic, with a virus of as yet unknown pathogenicity. The start of a pandemic if it occurs in a rural area in South East Asia may be 'stamped out' by targeted interventions around the first clusters of human cases, provided they are detected and responded to promptly. Should this initial containment fail, however, all European countries will be affected and this is the most likely scenario if a pandemic virus emerges. Further speculation on risk is probably unhelpful as the essential next step is to prepare and practice.
2. In the past 10 years, in addition to the Commission the EU has created a number of technical agencies such as the European Agency for the Evaluation of Medicinal Products (EMA), the European Food Safety Authority (EFSA), and recently, the European Centre for Disease Prevention and Control (ECDC) to the Commission and support member states. These various EU bodies and WHO are operating together to improve Europe's preparedness for pandemic influenza. The role of ECDC is supportive but crucial.
3. Guidelines and checklists for public health interventions have been produced by the World Health Organization and are the basis for action in Europe. They are being adapted to the European context. They cover appropriate surveillance and detection systems, stockpiling of antiviral drugs, timely vaccine development, but also public health (non-pharmaceutical) interventions, such as improved personal hygiene, early self isolation of cases, school closures and cancelling of mass events.
4. Some of these measures could be implemented without too much difficulty others will require significant preparation. Implementing these measures in a major pandemic will be feasible only with good national and international coordination.

ECDC Influenza Work

5. ECDC is making preparedness for pandemic influenza among its first and highest priorities. It is doing so as a collaborative effort with DG Sanco and WHO Europe. As influenza preparedness cuts across the work programme of the 3 technical units of ECDC it has developed a matrix approach to implement the work. The work is coordinated by a leader attached to the unit of scientific advice, but will draw upon the expertise available in all parts of the Centre as well as relevant groups externally including the European Influenza Surveillance Scheme (EISS) and member states. The components of the project, presented below and in an attached table aim at strengthening European and Member State preparedness and response by the following

- Risk monitoring and assessing the threat of avian and pandemic influenza – **a weekly five-item influenza status report and scientific update is being published on the ECDC website**
- Strengthening European, ECDC and country preparedness including developing relevant tools and guidelines and helping develop countermeasures and interventions
 - i. **Selected EU and neighbouring countries have being visited and these visits used to develop and improve an assessment tool and convert it to a self assessment tools. A summary report on this has been prepared and sent to the Commission as well as back to the countries themselves**
 - ii. **The EU pandemic preparedness questionnaire is being reapplied to countries by the Commission and analysed prior to:-**
 - iii. **A major country representative meeting is being undertaken for October 24th -26th in WHO-Europe HQ**
 - iv. **ECDC and all countries will participate in an EU wide pandemic exercise in November**
- Developing surveillance of seasonal, epizootic and pandemic influenza – **intense work is underway with the Advisory Forum, WHO European Influenza Surveillance Scheme (EISS) on the specific actions that will be during a pandemic.**
- Ensuring effective communication among Member states, European agencies and the European Commission, international partners, and the public **The communication tool will be developed and applied to influenza** (see separate paper to the Advisory Forum)
- Monitoring scientific developments, providing scientific opinion and promoting scientific issues related to influenza control
- Undertaking relevant advocacy through talks, presentations such as by the Director of the Centre to the European Parliament
- Supporting MS in investigation and response at early phases of the Pandemic and especially for Avian Influenza
- Establishing crisis co-ordination internally
- Developing key partnerships with the Commission, WHO Europe, the European Medicines Agency (EMA), European Vaccine Manufacturers the European Scientific Working Group on Influenza and other bodies. **A key weekly liaison tele-meeting held with the Commission which is now moving up to be more at the level of the Director.**

As ECDC is a new body for many of these activities the approach is to develop generic plans and tools that are then applied to influenza. For example the internal 'emergency plan' and communication strategy being developed for influenza will be a generic emergency or crisis plan. Finally assuming that we are fortunate enough not have a pandemic in 2005-6 the Centre along with EISS will still be working to strengthen the European response to seasonal influenza.

Annexes:

1. Summary Project Plan of ECDC Influenza Work (Working Document)
2. Influenza pages of ECDC the web-site
3. ECDC Editorial in the BMJ
4. Summary of the WHO Plan and the new Phases

ECDC Influenza Work Programme 2005 to end 2006

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It is impossible to assess the imminent risk of an influenza pandemic with any precision. The situation in East and South East Asia is worrisome with extensive epidemics in domestic birds of A/H5N1 and occasional transmissions to humans usually resulting in severe disease. The infections in birds have now extended to Europe and is causing a major problem with Risk Perception and Communication for the public, the media and some decision makers who are equating the arrival of A/H5N1 in Europe with the start of a pandemic.

WHO has set the world at Pandemic Alert Phase 3. The future is unknown and it is impossible to quantify the probabilities of a pandemic in the next three years with either A/H5N1 or another influenza virus. The only certainty is the need to prepare, practice and improve for an inevitable pandemic, even if this takes place some years hence. If a pandemic starts in a rural area e.g. in South East Asia it may, in theory be 'stamped out' by targeted interventions around the first clusters of human cases. This initial containment is considered likely to fail in which cases all European countries will be affected. This is the most likely scenario.

Though a pandemic is inevitable there are ways of reducing its impact and all Member States are producing plans to that effect. At a European level the Union has a number of agencies that will make important contributions. These include the European Agency for the Evaluation of Medicinal Products (EMA), the European Food Safety Authority (EFSA) as well as ECDC. These various EU bodies and WHO are operating together with the Commission and member states to improve Europe's preparedness for pandemic influenza. The role of ECDC is supportive but central.

Relevant guidelines and checklists for preparation have been produced by the World Health Organization covering surveillance and detection systems, stockpiling of antiviral drugs, timely vaccine development and production and public health (non-pharmaceutical) interventions, such as improved personal hygiene, early self isolation of cases and considering more drastic actions e.g. school closures and cancelling mass events. Some of these measures could be implemented without too much difficulty, many others will require significant preparation. Implementation during a severe pandemic is feasible only with good coordination and preparation at the European level.

ECDC has made pandemic preparedness one of its top priorities. The work cuts across the 3 technical units of ECDC, the office of the Director and Communications. Hence the Centre has developed a matrix approach (Table) coordinated by a leader the Scientific Advice Unit. The work is drawing upon the expertise available in external groups including the European Influenza Surveillance Scheme (EISS), ESWI and Member States.

The components of the project, presented in the table below will strengthen European and Member State preparedness and response in the following ten areas:

1. Risk monitoring and assessing the threats of avian and pandemic influenza
2. Strengthening European, ECDC and country preparedness
3. Further developing surveillance of seasonal and epizootic influenza and devising pandemic surveillance based on these

4. Ensuring effective communication among Member States, European agencies and the Commission, international partners, decision makers and especially to the public
5. Monitoring important scientific developments, providing opinion and promoting issues
6. Undertaking advocacy
7. Developing with others countermeasures and interventions tools and guidance
8. Supporting MS for investigation and response at early phases and especially for AI
9. Establishing crisis co-ordination internally
10. Developing key partnerships

As ECDC is new the approach is to develop generic plans and tools that are then applied to influenza. Finally assuming that there is no a pandemic in 2005-6 the Centre along will work with its partners to strengthen the European response to seasonal influenza as well as continuing to improve preparedness.

2005 Emergency Programme

Component	Primary Responsibility	Major Deliverables
1. Risk Assessment and Monitoring	PRU - Denis Coulombier	Establish weekly risk monitoring
	SAU – Johan Geisecke	Undertake a risk assessment for A/H5N1 in humans
2. Preparedness	PRU – Denis Coulombier	Develop a preparedness assessment tool Undertake pandemic preparedness assessment of Member, Accession and Neighbouring countries with WHO & Commission ‘Play’ in EU wide exercise
3. Surveillance	SCU – Andrea Ammon	Develop an initial pandemic surveillance plan
4. Communication	Directorate – Ben Duncan	Establish a presence for ECDC in the influenza field including a credible web presence
5. Scientific Watch	SAC – Johan Giesecke	Regular output of scientific information
6. Tools and Guidance	SAU – Johan Giesecke	Produce guidelines on occupational risk Produce guidelines on public health measures including masks
7. Drugs and Vaccines	SAU – Johan Giesecke	Clarify and establish the role of ECDC in this area with stakeholders
8. Investigation and Response	PRU – Denis Coulombier	Establish procedures for Outbreak Assistance Team suitable for influenza
9. Event and Crisis Coordination	PRU - Denis Coulombier	Tailor internal plans suitable for a pandemic
10. Partnership Development and Advocacy	Directorate - Director	Establish the role of ECDC in ‘peacetime’ and ‘wartime’ with major partners Ensure close links with the AF and MB on all important issues
11. Administrative support	Admin – Jef Maes	Establish procedures for supporting emergency response

2006 Completion of Start Up

Component	Primary Responsibility	Major Deliverables
1. Risk Assessment and Monitoring	PRU - Denis Coulombier	Continue weekly risk monitoring
2. Preparedness	PRU – Denis Coulombier	Continue pandemic preparedness assessments of Member, Accession and Neighbouring countries with WHO and Commission
	PRU – Denis Coulombier	Host the annual tripartite EC / WHO / ECDC pandemic preparedness conference
3. Surveillance	SCU – Andrea Ammon	Finalise a pandemic surveillance plan Produce a strengthen surveillance plan for peacetime
4. Communication	Directorate – Ben Duncan	Further develop web presence
5. Scientific Watch	SAC – Johan Giesecke	Commission quarterly reviews of specialist topics
6. Tools and Guidance	SAU – Johan Giesecke	Develop guidance on laboratory networks during ‘peace’ and ‘wartime’
7. Drugs and Vaccines	SAU – Johan Giesecke	With member states develop proposal for Europe achieving WHO targets on uptake of seasonal influenza vaccination.
8. Investigation and Response	PRU – Denis Coulombier	Organize with stakeholders a technical meeting influenza event investigation
9. Event and Crisis Coordination	PRU – Denis Coulombier	Run internal practice for pandemic response
10. Partnership Development and Advocacy	Directorate - Director	Further develop the external partnerships Host a high level technical meeting before Autumn 2006
11. Internal Management	Admin – Jef Maes	Test and improve procedures for supporting emergency response